



## Application

Name of Adopting Group or Individual					
Group Coordinator Name					
Mailing Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Number of participants in your group					
Please specify the area(s) you would like to adopt in order of preference.		Option 1.			
		Option 2.			
<input type="checkbox"/> I would like to have my name listed on the Village website in recognition of my efforts					
<p>I/we recognize the need and desirability of a litter-free Brookfield and am/are committed to picking up litter in my/our designated area for a period of (please select) _____one year or _____three years beginning each April. I/we agree to conduct cleanups at a minimum of six (6) times a year.</p> <p>I/we have read and understand the Adopt-A-Spot Program Guidelines and will abide by them and any other requirements of the Village of Brookfield for participation in the Adopt-A-Spot Program.</p>					
Signature of group's authorized representative or individual volunteer					
Print Name				Date	

**RETURN THIS APPLICATION WITH YOUR APPROPRIATE WAIVER(S) TO:**

Brookfield Beautification Committee  
8820 Brookfield Avenue  
Brookfield, IL 60513

For questions please contact Nicole Gilhooley at [Nicole.Gilhooley@yahoo.com](mailto:Nicole.Gilhooley@yahoo.com) or 773-793-2677.